PTO/SB/51 (07-03)
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REISSUE APPLICATION DECLARATION BY THE INVENTOR	SAT - 38 - RE
I hereby declare that:  Each inventor's residence, mailing address and citizenship are stated below to be the original and first inventor(s) of in patent number 6,326,747 granted Decreissue patent is sought on the invention entitled METHOD AND DEVICE FOR SYNCHRONIZATION the specification of which	the subject matter which is described and claimed cember 4, 2001 and for which a
is attached hereto.	
was filed on Nou. 26, 2003 as reissue application number	oer
and was amended on Nou. 76, 2003 (If applicable)	
I have reviewed and understand the contents of the above-identified specifical amendment referred to above.  I acknowledge the duty to disclose information which is material to patentabil	
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or equivalent) listing the foreign applications.	or 365(b). Attached is form PTO/SB/02B (or
I verily believe the original patent to be wholly or partly inoperative or invalid, below. (Check all boxes that apply.)	for the reasons described
by reason of a defective specification or drawing.	
by reason of the patentee claiming more or less than he had the right to	claim in the patent.
by reason of other errors.	
At least one error upon which reissue is based is described below. If the reissue, such must be stated with an explanation as to the nature of the broat The point of claim 2 is to use a means for elect equivalent to the output of the encoder Pm in the motor Mm and encoder Pm are not in the master strected that the Z phase pulse signal is not gene electric motor in the master section and delete encoder is in the master section.	dening: trically generating pulses he master section when the ection. Thus, claim 2 should erated on rotation of a real

[Page 1 of 2]

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	ON DECLARATION BY THE INVENTOR				Docket N		(Optional)
All errors corrected in t	this reissue application arose without any	deceptiv	ve intentio	n on the part o	f the appli	cant.	
Note: To appoint a pov	ver of attorney, use form PTO/SB/81.						
Correspondence Addre	ess: Direct all communications about the	applicati	on to:				
Customer Number	20311						
OR	•						
X Firm or Individual Name	Muserlian, Lucas and	Merc	anti,	LLP			
Address	475 Park Avenue Soutl	h					
Address	15th Floor			· · · · · · · · · · · · · · · · · · ·			
City	New York		State N.Y.			Zip	10016
Country	U.S.A.						
Telephone	(212) 661-8000		Fax (212)	661-8	002		
and belief are believe statements and the like	all statements made herein of my own kn ed to be true; and further that these s e so made are punishable by fine and imp jeopardize the validity of the application	statemei prisonme	nts were ent, or botl	made with the n, under 18 U.S	e knowled S.C. 1001,	lge tha , and th	t willful false at such willful
Full name of sole or fire	st inventor (given name, family name)						
Noriyuki SHTBA Inventor's signature  Date							
Residence	meguro 3-chome	Citizen		apanese			
Mailing Address Meguro-ku, T							
Full name of second jo Keiichi FUKUS	oint inventor (given name, family name)			···			
Inventor's signature		Date					
Residence			Citizenship Japanese				
6-32, Higashi Kashiwa-gaya Japanese Mailing Address 4-chome, Ebina-shi, Kanagawa, Japan							
Full name of third joint inventor (given name, family name) Takeshi MITSUHASHI							
Inventor's signature Date					•		
Residence Citizenship 6-32, Higashi Kashiwa-gaya Japanese							
Mailing Address 4-Chome, Ebina-shi, Kanagawa, Japan							
Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.							

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 2				
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor				ventor	
Given Name (first and middle (if any)			Family Nan	ne or S	Surname			
Ikuo 🗀	T. f			KOTAN	JT.			
Inventor's Signature							Date	
Residence: City	Kanagawa		State	Japan	Cou	ntry Japan	Citizenship	Japanese
Mailing Address	6-32. Higashi Kash	iw	a-q	aya				
Mailing Address	4-chome, Ebina-sh	i	,					
City	Kanagawa	,	State	Japan		Zip	Country	Japan
Name of Addi	tional Joint Inventor, if any:			☐ A pe	tition h	nas been filed for this	unsigned inv	ventor
G	siven Name (first and middle (if any)			Family Name or Surname				
Inventor's Signature				Date				
Residence: City			State	ate Country Citi			Citizenship	
Mailing Address								
Mailing Address								
City			State	ı		Zip	Country	
Name of Addi	itional Joint Inventor, if any:			☐ A pe	tition h	nas been filed for this	unsigned inv	ventor .
Gi	iven Name (first and middle (if any)			Family Name or Surname				
Inventor's Signature				Date				
Residence: City			State			Country		Citizenship
Mailing Address								
Mailing Address			<b>,</b>			,		
City			State			Zin	Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	infation unless it displays a valid civils control number.
Application Number	
Filing Date	Concurrently herewith
First Named Inventor	Noriyuki SHIBA, et al
Title	Method and DeviceControl
Art Unit	2837
Examiner Name	B. RO
Attorney Docket Number	SAT-38-RE

I hereby ap	point:							
<del></del>	titioners associated v	vith the Customer Number:	20	0311	\			
OR								
X Pract	X Practitioner(s) named below:							
		Name			Registration Nur	nber		
Do	onald C. Lu	ıcas		31,275				
Cl	harles A. M	Muserlian		19,683				
M	ichael N. N	Mercanti		33,966				
as my/our a	apna D. Gad attorney(s) or agent(s Office connected the	) to prosecute the application	identified abo	48,978 ove, and to tran	nsact all business in t	ne United States Patent and		
Please reco	ognize or change the	correspondence address for	he above-ide	ntified applicat	ion to:			
<b>X</b> 11	ne address associate	d with the above-mentioned (	Customer Num	mber:				
OR			ſ					
Т	he address associate	ed with Customer Number:						
OR								
x	Firm or Muserlian, Lucas and Mercanti, LLP							
Addr	ess	475 Park Aver	ue Sout	th				
Addr	ess							
City		New York		State	N.Y.	Zip   10016		
Cour		U.S.A.		Fax	(212)661-8	2002		
	phone	(212) 661-800	10	rax	(212)001	7002		
I am the:	licent/loventer							
Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.								
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Name	Nori	yuki S	HIBA					
Signature		·			Tolonhono			
Date					Telephone			
NOTE: Signator forms if more	atures of all the inventor than one signature is r	s or assignees of record of the en equired, see below*.	ire interest or th	heir representativ	ve(s) are required. Subn	nit multiple		
*Total of forms are submitted.								

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Application Number	
Filing Date	Concurrently herewith
First Named Inventor	Noriyuki SHIBA, et al
Title	Method and DeviceContr
Art Unit	2837
Examiner Name	B. RO
Attorney Docket Number	SAT-38-RE

l herel	y appoint:					1		
X	Practitioners associated w	vith the Customer Number:	2	031	(	.:		
C	OR							
Х	X Practitioner(s) named below:							
		Name			Registration Num	ber		
	Donald C. Lu	ıcas		31,275				
	Charles A. N	Muserlian		19,683				
	Michael N. M	Mercanti		33,966				
	Sapna D. Gad	dhia		48,978				
as my Trade	our attorney(s) or agent(s mark Office connected the	) to prosecute the application	identified abo	ove, and to trai	nsact all business in th	ne United States Patent and		
Please		correspondence address for divith the above-mentioned (			tion to:			
	OR			.,. <u>.</u> .,				
	ON							
	The address associate	ed with Customer Number:	•					
	OR	•						
Χ	Firm or Individual Name	Muserlian, Lu			nti, LLP			
	Address	475 Park Aver	iue Sou	th				
	Address			1011		7:- 110016		
	City	New York		State	N.Y.	Zip   10016		
	Country	U.S.A. (212) 661-800	10	Fax	(212)661-8	3002		
1 am i	Telephone	1212/ 001 000			(111)			
	am the: Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
		SIGNATURE of	Applicant o	or Assignee of	Record			
Name	Keii	chi Fuk	ushin	na				
Signa	ure				Talantan			
Date					Telephone			
NOTE: forms i	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
X	•Total of forms are submitted.							

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Application Number	
Filing Date	Concurrently herewith
First Named Inventor	Noriyuki SHIBA, et al
Title	Method and DeviceContro
Art Unit	2837
Examiner Name	B. RO
Attorney Docket Number	SAT-38-RE

I hereby appoint:					
Practitioners associated with the Customer Number:	20311				
OR					
X Practitioner(s) named below:					
Name	Registration Number				
Donald C. Lucas	31,275				
Charles A. Muserlian	19,683				
Michael N. Mercanti	33,966				
Sapna D. Gadhia as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	48,978 n identified above, and to transact all business in the United States Patent and				
Please recognize or change the correspondence address for	r the above-identified application to:				
The address associated with the above-mentioned	Customer Number:				
OR					
The address associated with Customer Number:					
OR					
X Firm or Muserlian, Lucas and Mercanti, LLP					
Address 475 Park Ave	nue South				
Address	100 1 W 17 1 10016				
City New York	State N.Y. Zip   10016				
Country U.S.A. Telephone (212) 661-80	00 Fax (212)661-8002				
Telephone (212) 661-8000 Fax (212) 661-8002  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
Statement under 37 CFR 3.73(b) is enclosed. (Form					
Statement under 37 CFR 3.73(b) is enclosed. (Form	of Applicant or Assignee of Record				
Statement under 37 CFR 3.73(b) is enclosed. (Form	of Applicant or Assignee of Record				
Statement under 37 CFR 3.73(b) is enclosed. (Form SIGNATURE of Name Takeshi Mitsu	of Applicant or Assignee of Record				
Statement under 37 CFR 3.73(b) is enclosed. (Form SIGNATURE of Name Takeshi Mitsu	m PTO/SB/96) of Applicant or Assignee of Record				

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Application Number	
Filing Date	Concurrently herewith
First Named Inventor	Noriyuki SHIBA, et al
Title	Method and DeviceContro
Art Unit	2837
Examiner Name	B. RO
Attorney Docket Number	SAT-38-RE

I hereby appoint:							
Practitioners associated of OR	with the Customer Number:	20311					
	Name		Registration Number				
Donald C. L	ucas	31,275	31,275				
Charles A.		19,683					
Michael N.	Mercanti	33,966					
Sapna D. Ga as my/our attorney(s) or agent(s Trademark Office connected the	s) to prosecute the application identified	48,978 above, and to trans	nsact all business in the United States Patent and				
Please recognize or change the	correspondence address for the above	identified applicati	tion to:				
The address associate	d with the above-mentioned Customer	Number:					
OR			<del></del>				
The address associate	ed with Customer Number:						
OR							
X Firm or Individual Name	Firm or Muserlian Lucas and Mercanti, LLP						
Address	475 Park Avenue So	outh					
Address							
City	New York	State	N.Y. Zip 10016				
Country	U.S.A.		(212) 661 9002				
Telephone	(212) 661-8000	Fax	(212)661-8002				
I am the: Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name IK uc	Kotani						
Signature			LTalambana				
Date			Telephone				
NOTE: Signatures of all the inventor forms if more than one signature is r	s or assignees of record of the entire interest equired, see below*.	or their representative	ve(s) are required. Submit multiple				
*Total of forms are submitted.							

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REISSUE APPLICATION: CONSENT OF ASSIGNEE STATEMENT OF NON-ASSIGNMENT	SAT-38-RE
This is part of the application for a reissue patent based on the ori	ginal patent identified below.
Name of Patentee(s)	
Kabushiki Kais ya 70K	yo Kika: Seisak usho
Patent Number	Date Patent Issued
6,326,747	December 4, 2001
Title of Invention	
METHOD AND DEVICE FOR SYNCHRONIZATION	CONTROL
1. Filed herein is a statement under 37 CFR 3.73(b).	(Form PTO/SB/96)
2. Ownership of the patent is in the inventor(s), and n	o assignment of the patent is in effect.
One of boxes 1 or 2 above must be checked. If multiple assigne box 2 is checked, skip the next entry and go directly to "Name of	
The written consent of all assignees and inventors owning an un patent is included in this application for reissue.	divided interest in the original
The assignee(s) owning an undivided interest in said original par and the assignee(s) consents to the accompanying application for	
Name of assignee/inventor (if not assigned)	
Signature	Date
Signature	Date
Typed or printed name and title of person signing for assignee (if a	assigned)

This collection of information is required by 37 CFR 1.172. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Kabushiki Kaisya Tokayo Kikai Seisa Kussho
Application No./Patent No.: 6326747 Filed/Issue Date: Dec. 4 2001
Entitled: Method and Device for Synchronization Control Kabushiki Kaisya Tokyo Kikai Seisakusho, a corporation (Name of Assignee)  (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:  1. 🗗 the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.  The extent (by percentage) of its ownership interest is % in the patent application/patent identified above by virtue of either:
A. [ ] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
OR
B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:
1. From: ————————————————————————————————————
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From:To:  The document was recorded in the United States Patent and Trademark Office at
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Reel, Frame, or for which a copy thereof is attached.
[ ] Additional documents in the chain of title are listed on a supplemental sheet.
[ ] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.
Date Typed or printed name
Telephone number Signature
Title

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